DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

×	Origina	al 🗆	Supplemental		Substitute		PCT
As a	below	named inve	ntor, I hereby d	eclare that:			
My r	esider	nce, post offic	e address and	citizenship a	are as stated be	low next to	my name.
origi	nal, fir	st and joint in	nventor (if more	than one n	(if only one na ame is listed be on the invention	elow) of the	
Dus	t-fre	е, ероху-со	ontaining stal	bilizer gr	anules and th	ne prepara	tion process
whic	h is de	escribed and	claimed in:				
×	the	attached spe	cification.				
	the filed	•	in U.S. Applicat , and as n/year)	tion No. s amended	on (day/mo	onth/year) (if applicable).
	the filed	•	in International	Application	No. PCT/		
	assi	igned Ú.S. A _l	oplication No.		(if appl	icable), and	l as amended
		under PCT A	Article 19 on	(day/month	(if appl	icable)	
		under PCT A	Article 34 on	(day/month	(if appl	icable)	
		and further a	amended on	(day/month	(if appl	icable)	

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is known by me to be material to the patentability of this application as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America relating to this subject matter having a filing date before that of th application on which priority is claimed:

US 06/98 /1

COUNTRY/REGION (OR PCT).	APPLICATION N	٥.	FILING (day/moi		TE ar)	PRI	ORIT	Y CLAI	MED
Europ (designating DE)	97810712.6		29.0	9.97	·	×	Yes		No
							Yes		No
							Yes		No
							Yes		No
							Yes		No
I hereby claim the beneapplication(s) listed bel	efit under 35 U.S.C ow:	. § 1	19 (e) of an	y Un	ited Sta	ites	provis	ional	
APPLICATION NO.			FILING DA (day/month/)						
I hereby claim the bene international application application discloses a copending application, material to patentability filing date of the prior application:	n(s) designating the nd claims subject I acknowledge the as defined in 37 (ne U ma duty C.F.F	nited States tter in addi to disclose R. § 1.56 wh	s list tion all in nich l	ed belo to that nformat pecame	w a disc ion l ava	nd, ir closec knowr tilable	nsofar I in the by me betwe	as the e prior e to be
U.S. APPLICATION No.	FILING DATE (day/month/year)				STATI	JS			
			Patented		Pendir	ng		Aban	doned
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			Patented		Pendir	ng		Aband	doned
			Patented		Pendir	ng		Aband	doned
			Patented		Pendir	ng		Aband	doned
PCT APPLICATION No. (designating the U.S.)	o. FILING DATE		U.S. APPLICATION STATUS No. (if any)			3			
							Pate	ented	
							Pen	ding	
							Aba	ndone	d

I hereby appoint the following attorneys and agents, associated with Customer No. 000324, each of the m with full power of substitution, revocation and appointment of associates, to prosecut this application and to transact all business in the Patent and Trademark Office connect differential therewith:

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Address all correspondence associated with Customer No. 000324 to *Ciba Specialty Chemicals Corporation, Patent Department, 540 White Plains Road, P.O. Box 2005, Tarrytown, NY 10591-9005.*

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor

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Inventor's signature

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Full name of fourth joint inventor, if any			
Inventor's signature		Date	
cc. c e.g.			(day/month/year)
Residence			
Citizenship			
Post Office Address	same as above		